

**SCUBA DIVING MEDICAL HISTORY FORM**  
(To Be Completed By Applicant-Diver)

Name \_\_\_\_\_ Sex \_\_\_\_ Age \_\_\_\_ Wt. \_\_\_\_ Ht. \_\_\_\_

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Mo/Day/Yr)

**TO THE APPLICANT:**

Scuba diving makes considerable demands on you, both physically and mentally. Diving with certain medical conditions may be asking for trouble not only for yourself, but also to anyone coming to your aid if you get into difficulty in the water. Therefore, it is prudent to meet certain medical and physical requirements before beginning a diving or training program.

Your answers to the questions are as important, in determining your fitness as your physical examination. Obviously, you should give accurate information or the medical screening procedure becomes useless.

This form shall be kept confidential. If you believe any question amounts to invasion of your privacy, you may elect to omit an answer, provided that you shall subsequently discuss that matter with your own medical practitioner and they must then indicate, in writing, that you have done so and that no health hazard exists.

Should your answers indicate a condition, which might make diving hazardous, you will be asked to review the matter with your medical practitioner. In such instances, their written authorization will be required in order for further consideration to be given to your application. If your medical practitioner concludes that diving would involve undue risk for you, remember that they are concerned only with your well-being and safety. Please respect the advice and the intent of this medical history form.

	<b>Have you ever had or do you presently have any of the following? Please explain any "Yes" answers on the next page.</b>	<b>Yes</b>	<b>No</b>
1.	Trouble with your ears, including ruptured eardrum, difficulty clearing your ears, or surgery		
2.	Trouble with dizziness		
3.	Eye surgery		
4.	Depression, anxiety, claustrophobia, etc.		
5.	Substance abuse, including alcohol		
6.	Loss of consciousness		
7.	Epilepsy or other seizures, convulsions, or fits		
8.	Stroke or a fixed neurological deficit		
9.	Recurring neurologic disorders, including transient ischemic attacks		
10.	Aneurysms or bleeding in the brain		
11.	Decompression sickness or embolism		
12.	Head injury		
13.	Disorders of the blood, or easy bleeding		
14.	Heart disease, diabetes, high cholesterol		
15.	Anatomical heart abnormalities including patent foramen ovale, valve problems, etc.		
16.	Heart rhythm problems		
17.	Need for a pacemaker		

